

IDAHO REAL ESTATE COMMISSION PO BOX 83720, 633 N. 4<sup>th</sup> St. BOISE ID 83720-0077 TEL: (208) 334-3285; FAX: (208) 334-2050 (866) 447-5411 toll-free in Idaho

Goals (What do you hope to accomplish as a result of this activity?)

TRS 1 800 377-3529 WEB: <u>www.irec.idaho.gov</u>

	Commission Use Only	
Funds Approved		
by/date:	Approval#:	
Expires:		

REE 022-5

Rev 08/08

## **Real Estate EDUCATION FUND AWARDS Application**

(For Use of Civil Penalty Fine Money)

Effective July 1, 2006, the Commission has civil penalty fine money available for developing and delivering real estate education for the benefit of Idaho real estate licensees (Idaho Code 54-2059(4) and 54-2021). The Commission will use this application to award monies from this fund for courses, events, and other educational activities. Strong consideration will be given to activities addressing licensee risk reduction. Please allow 90 days for a response.

RECIPIENT (PAYEE) INFORMATION		•	
Contact Name:			
Company Name (if applicable):			
Address:			
City, State, Zip:			
E-Mail:	Phone:	Fax:	
PROPOSED EDUCATIONAL ACTIVITY (plo	ease check one)		
<ul> <li>□ New Course Development</li> <li>□ Current Course Enhancement</li> <li>□ Event/Speaker Offering</li> <li>□ Research &amp; Development</li> <li>□ Video Production/Development</li> <li>□ Other (Please describe)</li> </ul>			
Educational Activity (Provide a detailed des	scription of the above a	ctivity.)	
Target Audience (Identify your target audier	nce for this activity, inclu	uding the anticipated attend	lance numbers.)
Needs Assessment (Provide an explanation	n of the need for the pro	pposed activity.)	

Delivery Method (Please check one)  □ Live □ Interactive Video Conferencing Note: ARELLO Distance Education certif	g □ Other ication, or its equivalent	, is required t	for any distance education course.				
Key Personnel (Identify the key individuals involved in the proposed activity. Attach resumes, if applicable.)							
Is the course offering approved for Ida	aho CE credit? □	Yes □ No	□Submitted to IREC & Pending Approval				
If yes, what is the course approv	al number?		Number of credit hours?				
Provider (List name and address of certified provider sponsoring this activity, if applicable.							
Date(s) offered (List the anticipated date	e(s) this educational acti	vity will be of	fered)				
FUNDING REQUEST							
	he proposed activity eve	n though it m	s of personnel, venue, materials, supplies, nay differ from your funding request.) You nt at the conclusion of your activity.				
Will your funding request cover the er ☐ Yes ☐ No If not, please list other fur activity. Indicate whether they are pending	nding sources, sponsors						
Will a fee be charged to the attendees	for this activity?	es 🗖 No 🏻 If	f "yes", how much? \$				
Exact Amount of Funding Requested: \$ Advance payment of awards will be made only in unusual circumstances. Applicants are discouraged from requesting advance payment.							
Applications are reviewed by the Educ 90 days prior to any scheduled activity within ten (10) days after the Commission	y for which you are red		s. Please submit your application at least ding. You will be notified in writing				
<u>Disclosure to the Public</u> . The informa requirements of the Idaho Public Reco							
Applicant's signature		 Date					
For Commission Office Use Only		Dan					
Date submitted to Education Council	Recommendation of th	e Education	Council				
Date submitted to Commission	Recommendation of th	e Commissic	on				

Location (Provide the exact location of the proposed activity.)